Happy New Year to The Legion Family and to all Veterans and those in Harm’s Way. Hopefully the new year can find a solution to the world’s problems and we can all live in Peace and prosperity.

My condolences to Dwight D: Eisenhower Post GR13 in Augsburg for the loss of Legionnaires David Post and Norm Powers who passed away in December. Paris Post FR01 also lost a member Legionnaire James Fowler Past away. We share your loss and will pray for the post and loved ones of Comrades Post, Powers and Fowler.

I have an appointment at GR06 on Wednesday 13 January 2016 for a Post Everlasting and then I’ll be at GR01 in Kaiserslautern on 16 January and in Ramstein at GR02 on 30 January For a Legion Awareness Drive. Hopefully we can enlighten a few good men and women about the American Legion.

The Department did an Electronic Vote on the Convention Packet and the Convention going to Belgium in June 2016. At this writing I have no idea what the outcome is and when I know the rest of you will know. I think we should resign ourselves to going to Belgium. I for one voted yes, and I’m sure that others have also voted yes. The vote ended at 23:59:59 on 31 December 2015. Seven (7) posts and ten (11) Department officers voted. Only those posts at the 2nd DEC were authorized to vote, plus Department Officers and Past Department Commanders. The vote stood at seventeen (17) yes votes and one (1) abstention. The 92nd Department of France Convention will be held 16 - 19 June 2016 in Houffalize, Belgium. Hope to see you all there.

Membership, membership, Membership: as of 27 December the Department stands at 78.5%. The Membership Chairman informed me that the Department has met it’s 85 % cut off for 20 January. We hope to move close to or over 100% with a Legion Awareness Drive at Ramstein Airbase on 30 January. All posts need to talk to their members who have not renewed yet and try to get them signed up.

Keith Abernathy
Department Commander
Keithabernathy1942@yahoo.de
VA's illnesses are not terminal

The headlines make it so tempting. Story after story of VA officials receiving lavish bonuses, managers manipulating patient wait times, derelict employees not being fired and whistleblowers being punished for simply reporting bad behavior. The Department of Veterans Affairs has earned its fair share of negative media attention the past couple of years, so it’s understandable that many taxpayers want to throw their hands in the air and say “shut ‘em all down.”

That reaction, though, is shortsighted and wrong. Veterans suffer a disproportionate amount of traumatic brain injury, post-traumatic stress, limb amputation, Agent Orange-connected illnesses and other signature wounds of war. And despite all its problems, VA provides the best care possible for the unique health needs of veterans.

The American Legion recognizes that veterans, in some instances, should be able to seek care from providers outside VA. If a VA facility is backlogged, unable to provide a particular treatment or too distant from a veteran’s home, we fully support his or her right to be treated elsewhere at government expense. But let’s not fool ourselves that a government “choice” program – or, worse, full privatization – is the answer to veterans’ health-care needs.

“I hear frequently from veterans ... about how difficult the Choice program has been,” Sen. Patty Murray, D-Wash., recently said on the Senate floor. “I hear how frustrating some of the bizarre rules and restrictions are – for example, an authorization of care only lasts 60 days. If you’re a woman veteran and you’re pregnant, you’re going to need more than 60 days of care.”

Even though the Choice program is relatively new, Congress already raided $3.3 billion from its budget last summer to pay for other VA needs. Imagine how easy it would be to cut funding and reimbursement rates in a system built entirely on vouchers. The veteran would be responsible for paying the difference, and if expenses go unpaid, VA does not suffer from a terminal disease. When patients have timely access to VA facilities, they are usually satisfied with their care. This is reflected in a recent poll by the Vet Voice Foundation, in which 64 percent of veterans said they oppose privatization of VA hospitals and services. When asked about VA hospitals in their area, 61 percent had favorable impressions. They added that health care “was a promise for their service.”

The problems that VA faces are not unsolvable, but they do require strong leadership. For starters, the Senate should pass – and President Obama should sign – companion legislation to the VA Accountability Act of 2015, which would make it easier to terminate any VA employee for incompetence or corruption.

VA must be given the resources and authority it needs to serve its expanding patient population. It was not the private sector that sent us to war; it was the U.S. government. Veterans fought for our freedom and deserve the best health care possible.


Dale Barnett
National Commander
**Department Officers - 2016 Membership Year**

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Hoping all had an enjoyable Merry Christmas And wishing everyone a Happy New Year ...From the Editor
DEPARTMENT ADJUTANT  Maxwell Rice

SUBJECT: 2016 Oratorical Finals

The Department Oratorical Contest will be held on Saturday, 20 February at the Brussels American High School. The contest will begin at 1300 and contestants are asked to be there at 1200.

Address:
Brussels American High School
J.F. Kennedylaan 12, Zaventem

DEPARTMENT VICE COMMANDER AT LARGE / MEMBERSHIP CHAIRMAN  Joe D. Brown

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| Total      | 158   | 908 | 112 | 2254 | 2892 | 72.63 | 77.53 |
I hope everyone had an enjoyable Christmas and a safe and Happy New Year’s Celebration. Prior to Christmas, Commander Abernathy and I attended GR06’s stated meeting in Stuttgart on the 9th of December and on the 13th VCAL Brown and I attended GR06’s Christmas dinner. Department of France’s Finance Officer, Gary Miller, put a lot of effort in preparing food and providing a wonderful evening for everyone. Have a Happy New Year and I look forward to seeing everyone soon. Regards, VC Hudson.

Who is eligible to join the Department of France Past Commanders Club?
PAST AND PRESENT Department Commanders, Department Vice Commanders At Large, Department Vice Commanders, Post Commanders, SAL Detachment Commanders, SAL Squadron Commanders, Auxiliary Department Presidents, Auxiliary Unit Presidents...so if you were just voted into office you are eligible to join

Initial dues for the Past Commanders Club is only $25.00
Renewal dues for the Past Commanders Club is only $10.00
Our next meeting will be prior to our Department Third DEC
HOPE TO SEE YOU THERE... David Greaux...PCC Secretary “2016”
Looking Ahead to the New Year:
With 2016 now upon us, I’d like to encourage all in the Department of France to make a specific plan of action as to what you want to accomplish in the new year – and then do it. Here are a few thoughts of my own that you might find useful:

1. We’re all about serving veterans – so I’m going to focus on identifying customers, whether Legion members or not. I’d like to see us increase our outreach, communication and engagement with both veterans and serving members of the Armed Forces. And if they are not members, invite them to join. We’ve got a lot to offer and a story of service to tell – and we all need to do that.

2. I’d like to see more members step up and take ownership of our programs and services. There’s a lot to be done to get our services out – and every member can do something. You don’t have to be an officer to volunteer to chair an initiative in your community – and I suspect that there’s a lot of talent that we might call on.

3. I’d like to see us take specific steps to reach out to veterans who are suffering from PTSD and TBI (traumatic brain injury). Recent combat situations in Iraq, Afghanistan and other Middle East conflict areas have increased PTSD events among our troops; and shock events from shelling, grenades and IEDs have substantially increased TBI events. We need to work with veterans to make sure that they are getting the services they need and that they have discharge and disability classifications that reflect their needs and situations. If they don’t, we need to help them with assistance to get those situations corrected.

Strong Push to Support 2016 Membership:
We’re in the home stretch for the 2016 membership year. Let’s double down on membership renewals and do the outreach needed to bring new members on board. Remember – we need a full team to be in the game.

Member Training and Certification:
The American Legion Extension Institute offers a terrific on-line education resource to develop your understanding of the Legion and its programs. Course modules include history and organization of the Legion, veterans’ affairs & rehabilitation, national security, Americanism, and children and youth. Go to www.legion.org, click on the Extension Institute, sign up and begin the journey. On conclusion, you’ll get a completion certificate and graduate pin. Want more? Apply for the Legion College. This intensive, one-week program is ideal to help you and fellow members build an effective and exciting Post. Go to http://www.legion.org/college/about to learn more and to apply.

Post Administration:
One of my New Year’s resolutions is to use the quiet days at the start of the New Year to tend to post administration issues. Do you have an up-to-date constitution and by-laws? Do these documents conform to the National and Department documents? Have you sent them to the Department’s Judge Advocate for approval? How about your Post’s calendar of events – have you prepared one and sent it out to your members and to Department officers? Does it include your meeting schedule for 2016? Now’s the time to tidy up all of these loose ends and get these documents prepared. If you need help, just ask any one of the vice commanders or the judge advocate. If you’re stuck on updating your Post constitution and by-laws, just ask for a sample copy to be sent to you. After that, it’s largely a cut-and-paste effort.

Update on Ireland’s New Post:
With approval officially in hand,
Post IR-01 is off to a great start, with 38 new and transfer members currently on the books as Charter Members. We’re targeting 50 members by March 17th, St. Patrick’s Day and the end of our Charter Membership drive. See the Post’s website (www.facebook.com/AmLegionIreland) and pass the word along!

With best wishes to all, For God and Country, John.

DEPARTMENT VICE COMMANDER  Quincy Foster

Holiday greetings to all Legionaries, thank God we made it through another year. I am looking forward to the new year and wish you all well. I would like to welcome our new post (IR01). I spoke to John Shanahan who is the acting Commander and they are off to a great start with over 30 new members. Next month they plan to come out with a post newsletter. So our thanks and best wishes go out to our new members and we are looking to working with them in the upcoming year.

Due to the 13th November terrorist attacks in France, Paris Post IT01 annual elections that was scheduled for 14 November 2015 but it was postponed until 5 December 2015. The Myron Herrick Medal Awards was also postponed until 16 January 2016.

Kaiserslautern Post GR01 will be hosting a BBQ meal at the USO Warrior Center at Landstuhl. They will also be holding its Oratorical Contest semi-finals will be on 20 January and the Finals 3 February 2016 at the Kisling NCO Academy Auditorium on Kapaun.

FOOD FOR THOUGHT!! The Kaiserslautern Post GR01 held their annual Christmas party this month and Commander Purdy was in the hospital in Landstuhl for throat cancer surgery. He signed himself out of the hospital and attended the Christmas Party and afterwards signed himself back in. Commander John Purdy is over 80 years old. Think about that the next time your post is having a meeting or function.

Quincy Foster, Vice Commander
Mobile: 049-(0)178398959
Email: Achange@qcfoster.com
Here is the picture of SGM (Retired) Frank CROSLEY who received on 12th December a wreath among the others resting at Arlington Cemetery.

THE AMERICAN LEGION: A QUICK GUIDE FOR LEADERSHIP ON FREQUENTLY ASKED QUESTIONS

Have we considered extending eligibility to Cold War veterans? This would assist in increasing our membership.

There was a very detailed study conducted in 1985 and is known as the Godwin Study (Membership Eligibility Study Committee Report). The study committee was charged to do the following:

- Study the history and precedents of all past eligibility studies and changes.
- To evaluate the distinction between —wartime veterans—and —peacetime veterans."
- To estimate the timing requirements to effect the change in our Congressional charter.
- To analyze the ultimate change in The American Legion’s long-standing history of being an organization of —War Veterans—and the impact of any change on the principles established at the founding of The American Legion.

The bottom-line of the study and the policy of the National Executive Committee adopted was that we would remain an organization of —Wartime Veterans—and that place of service does not impact eligibility, i.e., service in a combat zone is not a requirement for American Legion membership eligibility. As far as aiding veterans not eligible for The American Legion, our service officers will assist these veterans with any issue just like they do our members. It makes no difference if they are a member of The American Legion or not.

The Godwin study provides the most detailed and thorough review of eligibility issues to date.
Veteran’s Day, 11 Nov

- Members of the American Legion Post BE02 family participated in this year’s Ieper (Ypres) parade and ceremony. Each year the post represents the United States at this ceremony at the Menin Gate. VIPs included the US Ambassador to the Kingdom of the Belgians, Denise Bauer.
- At a second ceremony at the Flanders Field American Cemetery, Boy Scouts, local citizens, and members of the American Legion Riders paid tribute to our fallen during the Veterans Day 2015 Ceremony.
- Young Lady from Waregem adopted a grave (American Legion Post BE02's Adopt-a-Grave program) of a US Soldier at the Flanders Field American Cemetery. Visit the website [here](http://www.een.be/progr.../iedereen-beroemd/een-graf-adopteren).

Holiday Party, 05 Dec

- Each year, the members of the post and their families come together for holiday cheer and friendship. This year the Post's membership met at the 3-Star lounge at the USAG Brussels facility. We enjoyed a meal of turkey, ham, and pulled pork along with the holiday trimmings.
- The junior auxiliary members helped bring cheer to the event by wrapping gifts for the upcoming Orphanage Christmas Party.

Bastogne, 12 Dec

Commander Schram and SAL Vice Commander Hale participated in the Bastogne Nut’s parade and a ceremony held at the Patton memorial. They had the opportunity to honor the sacrifice of the soldiers who fought during the defence of Bastogne in December 1944 by laying a wreath.

Orphanage Christmas Party, 16 Dec

58 children received a special visit from Santa and received gifts during the annual Orphanage Christmas Party on Chiévres Airbase on Wednesday, 16 December. Before Santa arrived, the children had the opportunity to participate in a number of activities arranged by our Legion Auxiliary. The children also had the chance to eat American style cuisine (Hotdogs and Hamburgers) prepared by our own Legion Rider. Santa arrived this year by motorcycle and presented the children with holiday cheer.
**Military Times**: 2016 defense budget deal finally nailed down by Congress…

By Leo Shane III, Staff writer

Sen. John McCain, R-Ariz., Senate Armed Services Committee chairman, was among the critics of the measure, calling it a last-minute mess full of “wasteful, unnecessary, and inappropriate pork-barrel projects.”

But his House counterpart, Rep. Mac Thornberry, R-Texas, chairman of the House Armed Services Committee, called it “a responsible down payment
on the work that needs to be done in 2016 and beyond to properly resource our military and to protect our nation in a dangerous world."

Sen. Mitch McConnell, R-Ky., the Senate Majority Leader, called its passage a success.

Pentagon planners have been clamoring for a budget deal for most of 2015, saying the constant drumbeat of short-term spending extensions and shutdown threats undermines their efforts to start new programs and forecast long-term costs.

Both McConnell and Durbin said they’re hopeful the omnibus passage will lead to a smoother appropriations process in 2016, something House leaders also have promised.

The fall budget deal already has set spending levels for all federal agencies in fiscal 2017, including about $576 billion for defense programs and operations. That should mean less haggling and fewer political fights over funding totals.

But Congress also has a shorter legislative calendar next year because of the fall elections, and typically has passed only budget extensions during a change in administrations so as not to handcuff the incoming commander in chief.

The White House is scheduled to offer its fiscal 2017 budget plan in early February. That gives Congress eight months to pass a new budget before the end of fiscal 2016, or 10 months if they wait for another pre-Christmas agreement.

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The Other Side of 50

By J. J. Montanaro

With my 50th birthday now in the rearview mirror, I have decided to focus on the road ahead. Yes, it’s tempting to dwell on the negatives of reaching this landmark birthday, but I’m determined to stay positive.

In that vein, one of my first thoughts was, “Wow, I’m finally to the point where I can make those catch-up contributions – that extra $1,000 to an IRA or $6,000 to an employer plan – I’ve talked about for years.”

OK, maybe that really wasn’t one of my first thoughts, but it’s a good one. Catching up on retirement savings is a smart move for anyone who has eclipsed the half-century mark.

In terms of strategizing for your financial future, here are a few milestone birthdays to look forward to:

51 This isn’t a birthday that captures a lot of financial headlines, but it does mark a potential increase in the amount you can deduct as medical expenses for qualified long-term care premiums. For 2015, for example, you’re allowed to deduct up to $1,430 of premiums as a medical expense. That compares to just $710 if you were between 41 and 50. Beyond the bigger deduction, this is a good time in your life to look at long-term care insurance if you don’t already have it. Such a move can help cover the costs of this expensive type of care.
55 This year can be critical for many as they deal with retirement plan withdrawals. Employees who are separated from service in the year they turn 55 can access their 401(k) or 403(b) without paying the usual 10 percent early-withdrawal penalty. However, if you roll over the plan to an individual retirement account (IRA), you’ll lose this penalty-free access to your employer plan. This is also the age at which employees in an employer-sponsored stock ownership plan must be allowed to diversify their holdings. If your company stock represents a large percentage of your portfolio, spreading your risk among a greater number of holdings is often a prudent move.

59½ For many, this is the pivotal time for IRA and retirement plan withdrawals. You have probably spent decades accumulating assets in your IRAs and retirement plans, and at 59½ you are able to make penalty-free withdrawals without having to worry about special rules or exceptions. Of course, to minimize the effect of income taxes, planning is paramount. One example: you may want to start shifting money out of your retirement accounts, but don’t let the withdrawals bump you above the 15-percent tax bracket.

62 Starting Social Security retirement benefits becomes an option now. Just remember: Full Retirement Age (FRA) for those born from 1943 to 1954 is 66, and starting benefits before FRA results in permanent benefit reductions. So don’t make that move without careful consideration. Delaying benefits makes more sense for many people, but tailor your Social Security plan to your own situation. At 62, Federal Housing Administration rules make you eligible for a reverse mortgage, which allows you to convert home equity to income and still stay in your home.

65 A lot is happening at this point. First, the Medicare Initial Enrollment Period starts three months before your 65th birthday and lasts for three months after. If you don’t sign up when you are first eligible, you could be subject to a permanent Medicare late-enrollment penalty. That equates to higher premiums for the rest of your life. Second, the standard deduction increases for filers 65 and older, and you may be eligible for a special tax credit for the elderly. This could mean paying less in income taxes. Finally, at 65, you can withdraw money from your health savings account for any purpose without paying a penalty, but if you’re not using it for an eligible medical expense you will have to pay income taxes.

66 For most baby boomers, this birthday marks the FRA for Social Security. However, that doesn’t necessarily mean you should apply for benefits. Social Security provides delayed retirement credits for each month you push back your benefits, until you reach 70. Delaying could mean boosting your base benefit by as much as 8 percent annually.

70 If you haven’t already, it’s time to begin Social Security benefits. No more credits are available for putting it off. At 70½, you have entered the Required Minimum Distribution (RMD) age for IRAs and retirement plans. If you’re still working, RMDs are not required from your plan at work, but there’s no such exception for IRAs. In some cases, this might make a rollover from your IRA to your plan at work worth considering.

I’m not sure I would call writing this piece therapeutic, but it certainly helped remind me that there’s still plenty to plan for – even on the experienced side of 50.

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GR09 finds new member and also rewards an American student

“They are out there somewhere” Post Commander Aman states at each membership meeting when referring to Americans residing in the Ulm/Neu-Ulm area who are eligible for membership in the American Legion but have not yet joined. He was right and on 28 November the post inducted Bill Beachy, retired U.S. Air Force as its 49th member. Bill was pleased to have heard of the Legion and was happy to become a member of this patriotic organization and GR 09 is looking forward to his active participation.

Savannah Tudlong, daughter of U.S. Army active duty officer assigned to the Multinational Joint Headquarters, Ulm was eager to participate in the American Legion’s Oratorical Contest when first hearing of it however to her dismay discovered that she would have been unable to use any of National’s scholarship monies as she will be attending a University in England after graduating from Neu-Ulm’s International School. Because of her interest and willingness to participate in the American Legion, GR 09 did not hesitate and donated $600 for her university funds to use in the pursuit of her studies in archaeology and anthropology.
Evidence is mounting that veterans are suffering from pulmonary disorders related to deployment to the Middle East, but little is being done to diagnose and treat these illnesses, say researchers who are proposing new guidance for treating affected troops.

Thousands of Iraq and Afghanistan vets have respiratory problems that affect their daily lives, but few of them—or their doctors—know enough about war-related lung conditions to seek care or diagnose a disorder, says Dr. Anthony Szema, an assistant professor at Hofstra North Shore-LIJ School of Medicine and adjunct professor at Stony Brook University in New York.

"Despite the fact we have been doing this research for a handful of years, no one knows about the incidence of lung disease in the military," Szema said.

In an article published online Tuesday in the American Journal of Men's Health, Szema and colleagues argue that deployment-related lung conditions, which they call "Iraq/Afghanistan War-Lung Injury," are found in thousands of troops and veterans, the result of one or more environmental or combat-related factors within the U.S. Central Command area of operations.

Reported symptoms range from wheezing and chronic cough to asthma, low blood oxygen levels and debilitating fatigue related to an inability to take deep breaths.

With so many affected, more research and outreach is needed to make sure former troops are seeking and receiving treatment, researchers say.

"The soldiers don't really know about these conditions or have heard of the VA's burn pit registry, and doctors—even pulmonologists—aren't familiar with these exposures," Szema said.

The researchers examined recent findings from the Veterans Affairs Airborne Hazards and Open Burn Pit Registry as well as information provided by 38 veterans to the advocacy group Burn Pits 360 to gauge the effectiveness of current questionnaires in determining pervasiveness of lung disorders in post-9/11 veterans.

They found that both registries lack questions needed to identify veterans with combat-related lung disorders, pinpoint the causes or determine how many are suffering.

Neither registry "really teases out the nuances of occupational exposure during deployment," Szema said.

As of Dec. 31, 2014, nearly 46,000 veterans had enrolled in the VA's burn pit registry, with about 60 percent completing the associated questionnaire.

According to the data, roughly 14 percent reported respiratory symptoms and nearly 7 percent experienced new onset asthma after deploying to Iraq or Afghanistan.

More than 360 veterans say they have been diagnosed with a rare lung disease —
either constrictive bronchiolitis or idiopathic pulmonary fibrosis — not normally found in a young, healthy population.

Burn Pits 360 has more than 2,000 veterans in its database who believe they have illnesses related to exposure to fumes from trash burned in open pits in Iraq and Afghanistan.

But researchers note that other factors besides burn pits may be responsible for lung injury, such as fine particles of metal or bacteria found in the region’s soil and inhaled along with dust generated by sandstorms, blasts and the combat environment in general.

In earlier studies, Szema found that a higher number of service members who deployed to the region developed asthma, and he found titanium and other heavy metals in troops’ lungs.

Retired Navy Capt. Mark Lyles, a former Navy environmental researcher, found that fine microparticles of dust in Iraq and Kuwait contain metals that have been linked to illnesses such as neurological disorders and cancer, along with more than 140 kinds of bacteria and disease-spreading fungi.

But research into combat-related lung conditions remains controversial. The Defense Department and VA have maintained that the risk of long-term health problems related to exposure to dust and burn pits is relatively low.

And in 2011, the Institute of Medicine, the medical arm of the National Academy of Sciences, found insufficient evidence to determine whether open-air burn pits were directly responsible for the disorders and diseases being reported by some U.S. troops.

However, the IOM did say that particulate matter and metals in Iraq and Afghanistan dust may have contributed to long-term health consequences, but noted that limitations on the available data make it impossible to link the two.

Szema said that because the symptoms of Iraq/Afghanistan War-Lung Injury bear similarities to conditions like asthma and exercise-induced bronchospasms, determining its prevalence among troops has been difficult, and treating it has been even tougher.

Pulmonologists at Vanderbilt University Medical Center and National Jewish Health, a major medical research facility, have found through lung biopsies that at least 50 troops developed constrictive bronchiolitis, a rare disease that affects the smallest passageways of the lungs.

But some physicians have objected to conducting biopsies on affected troops because those kinds of risky invasive procedures provide little information besides a diagnosis, since constrictive bronchiolitis has no cure.

Szema and his colleagues argue that steps can be taken to determine whether a veteran needs a lung biopsy. Their recommendations to physicians and DoD include:

- Track a person's two-mile run time and spirometry readings before and after deployment.
- Conduct allergy testing to rule out allergens or allergy-related asthma.
- Use fractional exhaled nitric oxide tests to determine the extent of airway inflammation.
- Test with impulse oscillometry, where available, to measure pulmonary reactivity and perform specialty stress tests.

Unusual results from one or several of these tests may suggest the need for a biopsy, Szema said.

"Doctors may argue that lung biopsies are too invasive, but it's important for troops to get answers," he said. "It's terrible to be told there's nothing wrong with your lungs, that you are crazy. What happens then — you get sent to a psychiatrist and put on psychotropic meds? How right is that?"

He argued that because drugs are available for inflammation and clinical trials are underway on novel medications to treat inflamed airways, troops and veterans should be tested and monitored aside from the current protocol, which includes X-rays and spirometry to measure how well lungs function.

"What our paper asserts is the need for a standardized approach for evaluating and treating this disease," Szema said. "There are ways to figure out what is wrong other than 1950s-era technology which aren't subtle enough to test for these problems."
The Veterans Affairs Department has determined that eight medical conditions are linked to service at Camp Lejeune, N.C. from 1953 to 1987, and veterans with these diseases who were stationed at the sprawling Marine Corps base are eligible for disability compensation.

VA officials said Thursday that these eight diseases that have been determined to be service-connected to consuming contaminated drinking water at the base: kidney cancer, liver cancer, non-Hodgkin lymphoma, leukemia, multiple myeloma, scleroderma, Parkinson's disease and aplastic anemia or other myelodysplastic syndromes.

VA Secretary Robert McDonald said research by health experts at the Veterans Health Administration and the Agency for Toxic Substances and Disease Registry, an arm of the Centers for Disease Control and Prevention, indicated that the risk of developing these illnesses is elevated by exposure to contaminants found in the water, including perchloroethylene, trichloroethylene, benzene and other volatile organic compounds.

"The water at Camp Lejeune was a hidden hazard, and it is only years later that we know how dangerous it was," McDonald said. "We thank ATSDR for the thorough review that provided much of the evidence we needed to fully compensate veterans who develop one of the conditions known to be related to exposure to the compounds in the drinking water."

Nearly a million people, including troops, family members and civilian employees working at Camp Lejeune from the 1950s through the 1980s were exposed to these chemicals and other cancer-causing agents in the base's drinking water, supplied by two water treatment facilities polluted by dry cleaning compounds, leaking underground storage tanks, industrial spills and poor disposal practices.

The VA has provided health care or reimbursement for medical costs for veterans who served at Camp Lejeune at least 30 days during the affected period or family members with 15 illnesses related to exposure to water contaminated by solvents and fuels, but it had not awarded "presumptive status" to any condition until now.
The changes will take effect after VA publishes regulations regarding these presumptions, and will apply to new disability claims. Veterans who have previously been denied on such claims may seek to be re-evaluated. Also, any pending claims that might be denied under current regulations will be placed on hold until the VA issues its final rules, according to a department press release.

The bedrock eligibility rules will be that veterans must have one of the eight specified conditions and must have served at Camp Lejeune between Aug. 1, 1953, and Dec. 31, 1987.

The new rules also will expand eligibility to reserve and National Guard members who served at Camp Lejeune for any length of time during that period.

A VA spokeswoman said compensation awarded as a result of the proposed regulations, if adopted, will "be effective no earlier than the date the final rule is published."

Veterans have expressed frustration over the low rate of claims approvals for illnesses related to the Camp Lejeune water. Hundreds of veterans attended a meeting of the Camp Lejeune Community Assistance Panel on Dec. 5 in Tampa to express frustration with the VA's handling of claims and plead with VA officials to improve the process.

Paul Maslow, a veteran who walks with a cane and said he has inoperable tumors on his spine and elsewhere, said he and thousands of former troops need assistance.

"You are not helping us, you are hurting us," Maslow told VA officials attending the meeting. "And the more you delay, the more of us ... are going to die."

Two senators who pressed VA to change its policies regarding benefits for Camp Lejeune veterans said Thursday they applaud the VA's decision, calling it a "victory for those who have suffered."

"The VA has conceded that it will no longer deny disability benefits to Camp Lejeune victims based on ridiculous scientific claims," Sen. Richard Burr, R-N.C., said.

"VA is finally granting some justice to veterans who were exposed to contaminated drinking water while assigned to Camp Lejeune," said Sen. Thom Tillis, R-N.C. "The victims of this tragedy have waited far too long to receive disability benefits."